L17000181626

Office Use Only



200302514072

SECRETARY OF STATE TALLAHASSEE FLORIDA 17 AUG 18 PH 4: 34

200302514072 08/18/17--01006--010 **238.75

Will laster

NEOS EST

MOON AUG 18 2017:

SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive

Tallahassee, Florida 32312

(850) 656-4724

8-18-17

	DATE	**WALK IN**
ENTITY NAME	The Jersey Tomato Co., L	LC
DOCUMENT NUMB	er James Profile	
	PLEASE FILE THE ATTACHED AND RETURN	
	Plain Copy	SEO TALL
XX	Certified Copy	FI CRETAR LAHAS! AUG 18
<u> </u>	Certificate of Status	Hd SEE'' SEE''
		STATE LORIC
÷	* * PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**))
	Certified Copy of Arts & Amendments	
<u> </u>	Certificate of Good Standing	
	**APOSTILLE' / NOTARIAL CERTIFICATION **	
CO	UNTRY OF DESTINATION	
NU	MBER OF CERTIFICATES REQUESTED	
TOTAL COMED		
TOTAL \$ OWED	(60.00) 181	

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

	New Filing Section Division of Corporations				
	The Jersey Tomato, LLC				
SUBJEC	T: Name of	Limited Liabil	ty Company		
The enclo	sed Articles of Organization and fee(s)) are submitted	for filing.		
Please ret	urn all correspondence concerning this	matter to the f	ollowing:		
	Jonathan Smiga				
		Name of	Person	17	Ą
	Keen Growth Capital Fund II GP, L	.LC		AUG	[\(\frac{1}{2} \)
		Firm/Co	mpany	_ _ _ _ _ _ _ _ _ _	ASSE
	513 Main Street			НЧ	ے ت
		Addr	ess	- 	E ORI
	Windermere, FL 34786			- -	DA DE
	jonathan@keengrowthcapital.com	City/State an	d Zip Code	_	
	E-mail address: (to be us	sed for future a	nnual report notification)		
For further	information concerning this matter, ple	case call:			
	Gianfranco A. Pietrafesa	201	498-8559		
	Name of Person		Daytime Telephone Number		
Enclosed	is a check for the following amount:				
\$125.00 F	Filing Fee \$130.00 Filing Fee & Certificate of Status	LCertifi-	0 Filing Fee & Status Copy Status Copy is enclosed) Status Certificate of Status Certified Copy (additional copy is enclosed)		
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The Jersey Tomat	o, LLC			
(Must con	tain the words "Limited	Liability Company,	'L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street a	iddress of the principal c	office of the Limited	Liability Company is:	
Princip	nal Office Address:		Mailing Address:	
313 Main Street		513	Main Street	
The Limited Liability Company	ent, Registered Office, y cannot serve as its own	& Registered Ager	t's Signature: Ou must designate an individual c	17 AUG
ARTICLE III - Registered Ag (The Limited Liability Compan- another business entity with an	gent, Registered Office, y cannot serve as its own active Florida registration address of the registered	& Registered Agent. 'on.)	t's Signature:	813/
ARTICLE III - Registered Ag (The Limited Liability Compan- another business entity with an	ent, Registered Office, y cannot serve as its own active Florida registratio	& Registered Agent. 'on.)	t's Signature:	PH
ARTICLE III - Registered Ag	gent, Registered Office, y cannot serve as its own active Florida registration address of the registered	& Registered Agent. ' Registered Agent. ' on.) d agent are:	t's Signature:	PN 4:
ARTICLE III - Registered Ag (The Limited Liability Compan- another business entity with an	gent, Registered Office, y cannot serve as its own active Florida registration address of the registered Jonathan Smiga	& Registered Agent. Von.) d agent are: Name	t's Signature: 'ou must designate an individual c	PM
ARTICLE III - Registered Ag (The Limited Liability Compan- another business entity with an	gent, Registered Office, y cannot serve as its own active Florida registration address of the registered Jonathan Smiga	& Registered Agent. Von.) d agent are: Name	t's Signature: 'ou must designate an individual c	PM 4:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

	Name and Address:
"AMBR" = Authorized Member	er
"MGR" = Manager	
MGR	Jonathan Smiga
	513 Main Street
	Windermere, FL 34786
MGR	Jerry M. Bello, Jr.
	513 Main Street
	Windermere, FL 34786
MGR	David Stoff
MOR	185 NW Spanish River Blvd, Suite 200
	Boca Raton, FL 33431
(Use attachment if necessary)	·
	A COPTIONAL
LEV: Effective date, if other than	the date of filing: N/A (OPTIONAL)
	or the constituted and connect be more than five husiness that below 10 or 40 days
ffective date is listed, the date mu	ist be specific and cannot be more than five business days prior to or 90 days
ffective date is listed, the date mu	ist be specific and cannot be more than live pusitiess trays prior to or youngs
ffective date is listed, the date mu e of filing.) If the date inserted in this block d	oes not meet the applicable statutory filing requirements, this date will not be li
ffective date is listed, the date mu e of filing.) If the date inserted in this block do cument's effective date on the Dep	oes not meet the applicable statutory filing requirements, this date will not be li
ffective date is listed, the date muse of filing.) If the date inserted in this block decument's effective date on the Dep	oes not meet the applicable statutory filing requirements, this date will not be literaturent of State's records.
ffective date is listed, the date muse of filing.) If the date inserted in this block decument's effective date on the Dep	oes not meet the applicable statutory filing requirements, this date will not be li
ffective date is listed, the date muse of filing.) If the date inserted in this block deament's effective date on the Deport E. W. Other provisions, if any	oes not meet the applicable statutory filing requirements, this date will not be literature of State's records.
ffective date is listed, the date me of filing.) If the date inserted in this block decument's effective date on the Deporter VI: Other provisions, if any, mited Liability Company shall be	oes not meet the applicable statutory filing requirements, this date will not be literaturent of State's records.
ffective date is listed, the date muse of filing.) If the date inserted in this block deament's effective date on the Deport E. W. Other provisions, if any	oes not meet the applicable statutory filing requirements, this date will not be literature of State's records.
ffective date is listed, the date me of filing.) If the date inserted in this block decument's effective date on the Deporter VI: Other provisions, if any, mited Liability Company shall be	oes not meet the applicable statutory filing requirements, this date will not be literature of State's records.
ffective date is listed, the date muse of filing.) If the date inserted in this block decument's effective date on the Deporter VI: Other provisions, if any, mited Liability Company shall be REQUIRED SIGNATURE:	poes not meet the applicable statutory filing requirements, this date will not be ligartment of State's records. manager-managed.
effective date is listed, the date me of filing.) If the date inserted in this block document's effective date on the Deporter VI: Other provisions, if any, mited Liability Company shall be REQUIRED SIGNATURE: Signature This document	poes not meet the applicable statutory filing requirements, this date will not be ligartment of State's records. manager-managed. e of a member or an authorized representative of a member. is expected in accordance with section 605,0203 (1) (b), Florida Statutes.
ffective date is listed, the date me of filing.) If the date inserted in this block decument's effective date on the Deporter VI: Other provisions, if any, mited Liability Company shall be REQUIRED SIGNATURE: Signature This document Lam aware that	e of a member or an authorized representative of a member, is executed in accordance with section 605.0203 (1) (b). Florida Stantes, any false information submitted in a document to the Department of State
fective date is listed, the date me of filing.) If the date inserted in this block dement's effective date on the Dep LE VI: Other provisions, if any, mited Liability Company shall be REOURED SIGNATURE: Signature This document	poes not meet the applicable statutory filing requirements, this date will not be ligartment of State's records. manager-managed. e of a member or an authorized representative of a member. is expected in accordance with section 605,0203 (1) (b), Florida Statutes.
Tective date is listed, the date me of filing.) If the date inserted in this block dement's effective date on the Dep LE VI: Other provisions, if any, mited Liability Company shall be REQUIRED SIGNATURE: Signature This document	poes not meet the applicable statutory filing requirements, this date will not be ligartment of State's records. manager-managed. e of a member or an authorized representative of a member, is executed in accordance with section 605.0203 (1) (b). Florida Statutes, any false information submitted in a document to the Department of State red degree felony as provided for in s.817.155, F.S.

Filing Fees;
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

ARTICLE IV-